

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

ALVIN AYALA

#10A4180

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

THE CITY OF NEW YORK ET AL.,

POLICE OFFICER JASON NEGRON  
SHIELD NO. 29974

POLICE OFFICER LENARDO NIMO  
SHIELD NO. 511

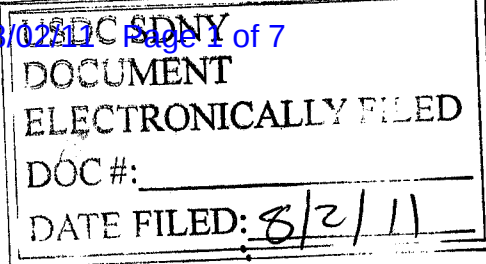
(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

**I. Parties in this complaint:**

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name ALVIN AYALA  
ID # # 10A4180  
Current Institution AUBURN C.F.  
Address 135 State Street  
AUBURN, N.Y. 13024

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.



AMENDED

**COMPLAINT**

under the  
Civil Rights Act, 42 U.S.C. § 1983  
(Prisoner Complaint)

Jury Trial: ☒ Yes ☐ No  
(check one)

11 CV 2177 (HB)

PRO SE OFFICE

Defendant No. 1 Name THE CITY OF NEW YORK Shield # LAW DEPT.  
 Where Currently Employed 100 CHURCH STREET  
 Address NEW YORK 10007-2601

Defendant No. 2 Name POLICE OFFICER JASON NEGRON Shield # 29974  
 Where Currently Employed 13th precinct new york  
 Address CITY POLICE DEPARTMENT.  
230 EAST 21 STREET N.Y.

Defendant No. 3 Name POLICE OFFICER LENARDO NIMO Shield # 511  
 Where Currently Employed 13 precinct new york  
 Address 230 EAST 21 STREET N.Y.

Defendant No. 4 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_

Defendant No. 5 Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_

## II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur? N/A

B. Where in the institution did the events giving rise to your claim(s) occur? N/A

C. What date and approximate time did the events giving rise to your claim(s) occur? April  
17, 2009 at approximately 2:00 PM

D. Facts: On April 17, 2009 the plaintiff herein was arrested in the count of new york by officer's of the new york city police department for an assortment of offense(s). 13 precinct. the plaintiff was thereafter arraigned in new york count criminal court and held in lieu of bail for further grand jury action. Docket # 2009ny31083.

What happened to you?

Who did what?

Subsequently thereafter plaintiff appeared before the grand jury which returned a NO true bill and all charges were dismissed and plaintiff was released after termination.

Was anyone else involved?

The plaintiff further contends that at the time of his arrest and prosecution; \$ 2,000.00 was removed from his personal property and vouchered for evidence which he now also seeks to recover. docket # 2009ny31083; dismissed July 22, 2009.

Who else saw what happened?

### III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. The plaintiff is seeking monetary compnesation in the amount \$ 250,000.00 for malicious prosecution, pain and suffering, mental anguish and theft of his personal property off \$ 2,000.00 which was held as evidence and never returned.

### IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes \_\_\_\_\_ No X

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

NONE

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes \_\_\_\_\_ No X Do Not Know \_\_\_\_\_

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes \_\_\_\_\_ No X Do Not Know \_\_\_\_\_

If YES, which claim(s)? \_\_\_\_\_

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes \_\_\_\_\_ No X

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes \_\_\_\_\_ No X

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

N/A

1. Which claim(s) in this complaint did you grieve? \_\_\_\_\_

N/A

2. What was the result, if any? N/A

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. N/A

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: N/A

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2. If you did not file a grievance but informed any officials of your claim, state who you informed, when and how, and their response, if any: \_\_\_\_\_

N/A

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- G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. \_\_\_\_\_

N/A

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**Note:** You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

**V. Relief:**

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). The plaintiff seek's monetary compensation in the amount of 5,000,000.00 for malicious prosecution, false - arrest, unlawful imprisonment, mental anguish, pain and suffering for violation of plaintiffs civil rights under 4th, 8th, 14th amendment of the constitution.

FIVE MILLION DOLLARS FOR DAMAGES.

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**VI. Previous lawsuits:**On  
these  
claims

- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes \_\_\_\_ No X

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff N/A

Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending? Yes \_\_\_\_ No X

If NO, give the approximate date of disposition N/A

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

On  
other  
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes \_\_\_\_ No X

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff N/A

Defendants \_\_\_\_\_

2. Court (if federal court, name the district; if state court, name the county) \_\_\_\_\_

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit \_\_\_\_\_

6. Is the case still pending? Yes \_\_\_\_ No \_\_\_\_

If NO, give the approximate date of disposition \_\_\_\_\_

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) The grand jury returned a No-true bill and was terminated in favor of the accused.

**I declare under penalty of perjury that the foregoing is true and correct.**

Signed this 26 day of July, 2011.

Signature of Plaintiff	<u>Alvin Ayala</u>
Inmate Number	<u># 10A4180</u>
Institution Address	<u>Auburn C.F.</u>
	<u>135 State Street,</u>
	<u>Auburn, N.Y.</u>
	<u>13024</u>

**Note:** All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 26 day of July, 2011, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff: 